Obituary

BRYAN AUSTIN McSWINEY, M.B., Sc.D., F.R.S.

British physiology and St. Thomas's Hospital, London, have lost an outstanding personality by the sudden death of Prof. Bryan Austin McSwiney on March 8.

An only child, he was born in Chicago on May 20, 1894; his family came from County Cork, Eire. Entering Trinity College, Dublin, in 1913, he was elected the Reuben Harvey Scholar in 1915. He then became a surgeon sub-lieutenant in the Royal Naval Volunteer Reserve and saw service in the Eastern Mediterranean. Recalled to complete his medical studies, he graduated B.A. in 1916, and M.B., B.Ch., B.A.O. in 1917. He took the Sc.D.(Dublin) in 1928. Commissioned as a lieutenant in the R.A.M.C., he acted as assistant to the scientific adviser of the Ministry of Food. At the end of the war he was appointed assistant to the Professor of the Institutes of Medicine in the School of Physic, Trinity College, Dublin. In 1919 he became lecturer in experimental physiology in the University of Leeds. In the following year he succeeded T. Graham Brown as lecturer in experimental physiology at the University of Manchester, under Prof. A. V. Hill. Here he remained for six years and began his study of involuntary muscle which was to interest him throughout the rest of his academic career. While in Manchester he collaborated with Prof. J. S. B. Stopford and the late Mr. E. D. McCrae in a study of the efferent innervation of the stomach, and with Dr. J. C. Bramwell and Prof. Hill in the measurement of pulse wave velocities.

In 1926 McSwiney was invited to return to Leeds as professor of physiology, a position he was to occupy for the next ten years. During this time he accomplished much of the work that brought him a world-wide reputation. His particular interest lay in the gastro-intestinal tract. Initially concerned with its motility, he became interested, through the problem of its tonus, in the study of the afferent innervation of the gastro-intestinal tract. In their attack on this problem the work of McSwiney and his colleagues bears all the hall-marks of singleness of purpose, consummate skill in physiological experimentation, and painstaking accuracy. McSwiney's interests in physiological investigation were not confined to academic research; he realized to the full the part physiology could, and must, play in industry, and he was always willing to place his knowledge and enthusiasm at the disposal of industry. In his department he gave hospitality to physiologists and chemists working on behalf of the Safety in Mines Research Board, and to others concerned with subjects as diverse as the fastness of dyes in textiles, and veterinary anthelmintics. During this period he showed a flair for organization and for laboratory design. He was chiefly responsible for the design and equipment of a new wing to house physiological and biochemical research. This building, which contains an animal house, operating theatre, *x*-ray laboratory, workshop, and a small-scale chemical plant, in addition to biochemical and experimental physiology laboratories, remains in the forefront of such design.

In 1936 McSwiney was invited to the chair of physiology in the University of London at St. Thomas's Hospital Medical School, in succession to Prof. John Mellanby. In June, 1939, he learned that W. M. Boothby and his colleagues had developed an efficient mask which would deliver oxygen at high concentrations with minimal embarrassment to the subject. With Sir Henry Tidy and Dr. J. Forest Smith he journeyed to Boothby's laboratory at the Mayo Clinic. They returned the week before the war began with much of the basic equipment used to form the oxygen therapy units of the E.M.S.

When it became necessary to evacuate the hospital and medical school from London in October, 1940, McSwiney was largely responsible for their establishment in Surrey. After his appointment as Dean of the medical school in 1940 he continually concerned himself in maintaining and extending the activities of the hospital and the school and later in arranging for their re-establishment in London. He was elected a Fellow of the Royal Society in 1944, and to the Senate of London University in 1946.

Since the war he had twice visited the West Indies on behalf of the University of London to consider the possibility of establishing a medical school there. Last summer, at the request of the Colonial Office, he toured East Africa to report on medical education. He had returned from examining for the Primary Fellowship of the Royal College of Surgeons in Egypt, India, and Australasia only a week before he was taken ill with bronchopneumonia, which was the prelude to his sudden and untimely death.

Bryan Austin McSwiney was remarkable for his accessibility. He listened as attentively to the most junior technician as to the most senior surgeon or physician. He was always willing to discuss any problem, though not prone to give dogmatic advice. His enthusiasm was boundless, his encouragement infectious, and he revelled in work. He believed, more than most, in the apprenticeship system, but once the term had been satisfactorily served he gave his colleagues his complete trust and support. Many owe such knowledge as they possess of a particular subject not so much to what he told them as to the encouragement and opportunities he gave them to further their own investigations. Above all, his views were sound common sense. He will be missed by many people, not all within his immediate academic circle. He leaves a widow, two daughters, and three sons.

Mr. John B. Hunter writes: The news of the death of Bryan McSwiney will have come as a great shock to his many friends and colleagues. He came to London with a great reputation as a physiologist, both as a teacher and research worker, having held several appointments in the provinces. Shortly after his arrival he showed he was also a man of affairs. He was in great part responsible for the promotion of the resuscitation units that were formed during the war, bringing his physiological knowledge of shock to the practical side of resuscitation. In 1940, when he was appointed Dean of St. Thomas's, he became known to a wider circle in the University of London. His gift of clear thinking and his administrative qualities were soon appreciated, and he became secretary to the Conference of Metropolitan Deans and a member of the Collegiate Council of the University, and, later, a member of the Senate. It was my good fortune to be associated with him in these activities, and together we travelled some thousands of miles on a Colonial inquiry, and I came still more to appreciate his likable qualities and his sense of humour, chiefly shown in his appreciation of the ludicrous, which does so much to keep our sense of proportion. His advice in connexion with medical education in the West Indies and Africa will be sorely missed in the University of London and the Colonial Office—for he had wide knowledge of the subject gained at first hand in the Colonies—as will his counsel on medical education in this country.

R. J. GLADSTONE, M.D., F.R.C.S., F.R.S.ED.

The anatomical world will mourn the death of R. J. Gladstone on Feb. 12, for, although he did not hold a chair of anatomy, he was one of the best-known members of the Anatomical Society of Great Britain and Ireland for over fifty years. He was born in 1865, the son of Dr. T. H. Gladstone, and was educated at Clapham Grammar School and the University of Aberdeen, where he qualified M.B., C.M. in 1888. After leaving Aberdeen he became house-physician and later house-surgeon at the Middlesex Hospital. Having a bilateral congenital cataract, he decided to make anatomy his special field of work, and was appointed junior demonstrator in anatomy at the Middlesex Hospital Medical School in 1895. The following year he was promoted to senior demonstrator of anatomy and took his final F.R.C.S.

By this time Gladstone had already started to publish some of his original papers, and in 1905 he went to Vienna with Dr. R. A. Young to investigate methods of teaching anatomy and surgery. A year later he visited Vancouver as a representative of the British Medical Association. He made new contacts and friends and came back to this country with fresh ideas on the teaching of medical students. He continued his association with the Middlesex Hospital until early in 1913, when he became reader in anatomy at King's College, London, a post he held until his retirement in 1938. Gladstone had a very extensive knowledge of anatomy, morphology, anthropology, and embryology. He read extensively and was a thorough master of his subject. Sir Arthur Keith was wont

to say that Gladstone had a better knowledge of human and comparative embryology than any other anatomist of his day.

Gladstone was a born worker and put in a very full day in the anatomy department. He did his full share of demonstrating in the dissecting-room, and in this respect was an example to those senior demonstrators who consider their job is purely research. At night he worked on the many papers that came from his pen. He loved music and was always delighted to attend any musical show that medical students organized. He was an ardent supporter of the Zoological Society and spent most of his Sundays in the gardens making friends with a variety of different animals.

He could not see clearly beyond a few feet, and this no doubt was his greatest handicap in life, as he could not see the pranks his students were performing during his lectures, and he would have found it difficult to have had sole charge of a department. Although the students ragged him and were liable to be somewhat uproarious during his lectures, he was very popular and was affectionately known as "Gladeye." He worked hard for the Anatomical Society and put in many years as Recorder; his notes of meetings were a model for any successor to emulate. He rarely missed a meeting and was always willing to help the younger members of the Society. He never pushed himself forward and was always content to take a back seat. When he spoke at meetings his remarks were constructive and had practical experience as their main background.

Gladstone wrote with Cecil Wakeley a book on the pineal organ, which is a most comprehensive volume and one which has been styled as the most practical and valuable work that has ever been published on that subject. In 1930 he began to write a textbook on human embryology, but this has never been completed. This was because as soon as he finished one section he wanted to revise it and bring it up to date. He completed over 500 drawings for this book, and anatomists the world over are the poorer for its non-appearance. He married in 1912, and a son and a daughter completed a very happy home. He often worked far into the night, and was meticulous regarding the facts and figures that appeared in his writings. For many years he was a valued contributor to the columns of the *British Medical Journal*, and he had been a member of the B.M.A. for over fifty years.

He was a lovable and meek man who turned the other cheek rather than speak out against those who did not agree with him. When he retired from King's College he spent his time abstracting medical literature, or else reading proofs and verifying references in medical articles passed for press. His house in Dulwich was bombed in 1941 and he had to move. He found a new home at Brockenhurst, where he continued his work until a few days before his death. Gladstone was a born artist and illustrated his many papers with excellent drawings. His daughter has inherited this talent. Gladstone left a wealth of embryonic material behind him at King's College. There are series of sections of human embryos, all carefully documented, which should prove of the greatest value to students of anatomy and embryology.

LOUIS COBBETT, M.D., F.R.C.S.

Dr. Louis Cobbett was taken ill at his home at Cambridge on March 9, and died in hospital the next day at the age of 85. Louis Cobbett was born in 1862 and was educated at Lancing and Trinity College, Cambridge. After leaving Cambridge, where he had come under the influence of Sir George Humphrey, he went to St. Thomas's Hospital, obtaining the Conjoint Diploma in 1890, the Cambridge M.B. in 1892, and later the F.R.C.S. He was house-surgeon to the late Sir William MacCormac. He proceeded M.D. in 1899 with a thesis "On the nature of the action of antitoxin."

He returned to Cambridge in 1893 as demonstrator of pathology under C. S. Roy, the first professor of pathology in the university. In 1894 he resigned the demonstratorship and became John Lucas Walker student, a post he held till 1897. In 1894 he became interested in diphtheria, especially in the production and effects of antitoxin and in the cultural characteristics of the diphtheria bacillus. During the next few years he published several papers on these subjects. In 1900-1 outbreaks of diphtheria in Cambridge and Colchester gave him the opportunity of tracing the spread of the disease by the examination of school and other "contacts." He investigated the virulence of cultures from all patients and infected contacts, and in order to check the spread of the disease arranged for the isolation of the latter till the bacilli had disappeared from their throats and noses. His were among the first large-scale investigations of this type.

In 1902 he was appointed scientific investigator to the Royal Commission on Tuberculosis, with charge of one of the experimental farms at Stansted. The well-known results of his work there were published in an appendix to the Royal Commission's report of 1907. For about a year he held the professorship of pathology in the University of Sheffield and then returned to Cambridge in 1908 on his appointment to the lectureship in pathology, a post he held till 1929. During this period he taught with great enthusiasm and published many papers, chiefly on the mode of spread of tuberculosis. After retiring from the lectureship he worked in the department of pathology, mainly on the bacteriology of tuberculosis, and gave courses of lectures to students taking Part II of the Natural Sciences Tripos. He had been a member of the British Medical Association and acted as vice-president of the section of pathology and bacteriology at the Annual Meeting in 1920.

According to a correspondent Dr. Cobbett was remarkable for his kindly disposition, his keenness in teaching, his interest in and kindness to the junior assistants in the department, and his enthusiasm in discussing every subject in which he was interested. He was unmarried.

Dr. PRIDEAUX GEORGE SELBY died at the age of 81 on Feb. 26. Dr. Selby was born in 1865 at Dunedin, New Zealand. He was educated at Bedford Grammar School and at St. Bartholomew's Hospital. After qualifying in 1887 he studied for a while in Vienna. In 1890 he started in general practice at Teynham, Kent, and was soon after appointed medical officer of Beaconhill Hospital in the old Faversham Rural District Council. In 1905 he succeeded the late Dr. F. A. Genge as medical officer of health for that district. In 1935, when the Faversham and Milton rural districts were amalgamated to form the present Swale Rural District, Dr. Selby retired, but on the death of his successor, Dr. Wernett, he resumed duty as acting medical officer of health pending a new appointment. When war broke out it became impossible to make such an appointment and Dr. Selby had loyally carried on ever since. A great deal of work devolved on him in organizing and superintending A.R.P. work in this locality, and many bomb incidents had to be attended to in addition to his ordinary work. He sold his general practice in 1943, but continued his work as acting M.O.H. until his death. During the war of 1914–18, Dr. Selby served with the rank of major in the R.A.M.C., and was awarded the O.B.E. Dr. Selby contributed two short articles to this *Journal* at the end of the last century and in January last we published a letter from him on the discovery of chloroform. He had been a member of the B.M.A. for just under sixty years.

Medico-Legal

A CONFLICT OF EVIDENCE

The Cornock Case

The trial of Mrs. Rosina Ann Cornock, who on March 7 was acquitted at Bristol Assizes, furnished an unusually striking and complete conflict of medical evidence.

Mr. Cornock was addicted to masochistic practices in which his wife took part, and on the evening of Friday, Dec. 6, 1946, the day before his death, she had at his request tied up his wrists and ankles and beaten him. A young cripple called Gilbert Kenneth Bedford, and said to be in love with her, was staying in the house with the couple for the week-end (as he often had before). He saw the scene through a glass-panelled door. At some time after 1 a.m. on Sunday, Dec. 8, Mrs. Cornock called an ambulance, and at 2 a.m. Dr. G. R. Fells found Mr. Cornock's dead body laid in a bedroom. The head was bruised in five places, the shoulders and elbows were injured, the small of the back was abraded, the knees and shins were bruised, and the wrists and ankles were rope-marked. Torn-up love-letters written by Mrs. Cornock and Bedford to